

# Job Description

<b>Company</b>	Sunset Park Health Council	<b>FLSA</b>	Exempt
<b>Job Code</b>	500406	<b>Classification</b>	1199
<b>Title</b>	Care Manager	<b>Probationary Period</b>	3 Months
<b>Position #</b>	10052283		

## Position Summary:

The Care Manager is part of an interdisciplinary team that includes, but is not limited to, medical and behavioral health providers servicing patients who suffer from complex medical and/or psychiatric co-morbid conditions. By improving patients access to and coordination of care, the Care Manager will be part of a team that improves patient health and thus quality of life.

## Job Responsibilities:

- Maintain caseload size established by the department and meet monthly core service productivity requirements.
- Assess patients care management needs via patient intake assessments.
- Assist patients in creation and implementation of care plan goals including lifestyle behavior change goals to improve health outcomes..
- Provide case management services in the office and via home visits that promote high quality, efficient and cost effective care. Identify case management interventions tailored to the patients Stage of Change using the principles and techniques of Motivational Interviewing to assist patients to achieve behavior change goals. Monitor goal achievement and revise plan as needed.
- Assist patients and their families with benefits, entitlements, and housing as well as any other identified needs that impact patients physical health and emotional well-being.
- Assists patients with accessing a full range of medical, behavioral health, chemical dependency, psychosocial, and community services including referral to self-help groups and faith based organizations
- Advocates for patients when barriers to care exist including language and literacy barriers, access to transportation, problems with insurance coverage, child care problems, appointment scheduling conflict, etc
- Conduct pre-visit planning for high risk patients and communicate patient health status alerts to the patients care team.
- Conduct hospital discharge calls within 24 business hours of discharge to confirm outpatient FHC appointments, to schedule/re-schedule appointments when necessary, and to address barriers to appointment compliance. Monitor patients transition from inpatient to outpatient care and coordinate aftercare.
- Assist patient in scheduling and obtaining transportation to medical and specialty appointments.
- Maintain electronic records and compile statistical data in accordance with the departments standards. Complete clinical documentation within required time frames.
- Performs other duties as assigned or volunteered in alignment with medical center mission, goals and values.

## Additional Position Specific Responsibilities:

### Minimum Qualifications:

Bachelors degree OR a Current CASAC certification Previous case management or patient navigation experience. Computer, telephone, fax machine, and photocopy machine skills required

### Preferred Qualifications:

BA in social service or medical care fields. Bi-lingual English/Spanish or Bi-Lingual English/Chinese (Cantonese/Mandarin)



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## Required Licenses & Certifications:

Code	Description	Required/Preferred
30679	BA-Bachelor's Degree as Cert	Preferred
30680	CASAC	Preferred

## Education:

Degree Type	Degrees Info	Required/Preferred
Bachelor's Degree		Required

## Required Languages:

Code	Description	Required/Preferred
20037	Chinese	Preferred
20052	English	Required
20208	Spanish	Required

**Minimum Experience:** 0

## Other Working Conditions:

Standard office environment Occasional exposure to hear dust fumes cold loud noise Ability to access all areas of the institution Ability to see or access information in print and or transmitted electronically Ability to hear oral instructions Performing job duties may require prolonged periods of sitting standing walking Care Manager may be required to conduct home visits in the community and must be able to utilize public transportation to access patients homes.